3.14

DoD Space Planning Criteria for Health Facilities Urology

FUNCTION	ROOM	AUTHO	ORIZED	DI ANNING DANGE/COMMENTES
FUNCTION	CODES	m ²	nsf	PLANNING RANGE/COMMENTS

3.14.1. PURPOSE AND SCOPE:

This section provides guidance for the space planning criteria for the urology activities in DoD medical facilities. These services are typically for inpatients and outpatients.

3.14.2. DEFINITIONS:

Cystoscopy: Visual examination of the interior of the bladder by means of a cystoscope.

Full-Time Equivalent (FTE): A work force equivalent to one individual working full time for a specific period, which may be made up of several part-time individuals or one full-time individual. This will include everyone working in the facility; military, civilian and contractor personnel.

Intravenous Pyelogram (IVP): An IVP (Intravenous Pyelogram) is an X-ray examination of the kidneys. After a plain film (without X-ray contrast) is obtained, the Radiologist injects radio-opaque contrast in a vein. A film is obtained immediately to determine the actual size of the kidneys. After waiting between five and ten minutes, another film is taken to show the collecting system as it begins to empty. Ideally the kidneys, ureters and bladder are all visualized on this film.

Office: Room Code OFA01 is a private office outfitted with standard office furniture. Room Code OFA02 is a private office outfitted with systems furniture. Room Code OFA03 is a cubicle outfitted with systems furniture.

Preceptor/Consult Room: - A location is required for residents in training to be able to discuss cases in private with supervising faculty physicians (preceptors). These discussions occur during the course of a patient visit, requiring proximity to exam room areas. In clinic configurations with staff physician offices clustered near exam rooms, precepting may be feasible from the faculty physician's own office and not from a dedicated central preceptor room. Note that any space provided for precepting must afford privacy from eavesdropping patients and passers-by ... hence an open area accessible by non-staff is NOT acceptable.

Provider: A provider in a urology service is an urologist. The term 'staff providers' does not include residents.

<u>Urodynamics:</u> Urodynamics refers to a group of diagnostic procedures that are performed to evaluate voiding disorders. The goal of diagnosis and treatment of these disorders is to: (1) protect the kidneys and (2) keep the patient dry.

<u>Urology:</u> The branch of medicine concerned with the diagnosis and treatment of diseases (especially by surgical technique) of the urinary tract of both male and female and of the genital organs of the male.

<u>Video urodynamics:</u> Video urodynamics requires the availability of the most specialized urodynamic equipment. The digital monitoring systems take video image information from a fluoroscopy unit and provide digital video image, on screen with pressure data. This process allows the physician to visualize events in the lower urinary tract along with pressure, flow and EMG data.

3.14.3. POLICIES:

<u>Clinic Composition:</u> A separate urology clinic will not be programmed if the number of provider FTEs is 2 or less. When staffing does not support a separate clinic, the service may be combined with the general surgery clinic.

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Providers' Examination Rooms: Each urolologist will be provided with two examination rooms.

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Providers' Offices: Each provider on the staff, who has patient appointments, will be provided a private office.

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Residents' Office Space: Private office space will not be programmed for graduate medical education residents. Residents who are in a graduate medical education program studying to become a specialist in the service being programmed, will be provided with shared office space of 60 nsf per resident in the program. An office for a rotating resident may be programmed in the clinic for residents who see patients.

Resident's Office/Examination Rooms: Additional office and examination room space may be programmed into a clinic to provide space for "rotating residents" to see patients. A resident during his or her rotation in the clinic will use this space when they see patients as walk-ins or on appointment. One office and two examination rooms may be programmed for each resident FTE projected to be in the clinic seeing patients. Note: these residents are not necessarily urology residents only; family practice, and internist residency programs may require a rotation in the orthopedic clinic.

3.14.4. PROGRAM DATA REQUIRED:

How many FTE providers are projected?

How many nurse managers are projected?

How many FTE nursing staff are projected?

How many NCOIC/LCPO/LPO/SMT are projected?

How many officers or officer equivalents are projected?

How many staff will require a private office?

How many staff will require a cubicle?

How many staff will require a locker?

How many FTEs on peak shift are projected?

Will there be vending machines in the staff lounge?

Will there be a Residency Program?

Will there be a Residency Program Director?

Will there be a Residency Program Secretary?

How many Residents are projected?

How many Residency Staff require a private administrative office?

How many Residency Administrative Staff cubicles are required?

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3.14.5. SPACE CRITERIA:

NOTE: GP indicates that a guideplate exists for that particular Room Code.

RECEPTION AREAS

Clinic Waiting	WRC01	5.57,	<u>£0,</u>	Minimum. Provide three seats per each projected FTE provider. Provide 16 nsf for 95% of the seats and 25 nsf for 5% of the seats (handicapped waiting). Note: this space can be divided into separate isolation and well waiting areas. If divided, recommend providing 67% of space for a main waiting area.
Reception (GP)	RECP1	13.01	140	Minimum. Provide 140 nsf for the first eight providers. Increase 60 nsf for each increment of four providers over the initial eight providers. Includes space for two technicians. When only one technician required, consolidate with adjacent department, where possible.
Patient Education Kiosk/Alcove	CLSC1	3.72	40	One per clinic.
Patient Education Cubicle	CLSC2	2.72	<u>30</u>	Provide if in clinic concept of operations. Includes a computer workstation for patient self-assessment, printing educational brochures, etc.
Public Toilets	NA	NA	NA	Space will be provided in the Common Areas. See Section 6.1.

PATIENT AREAS

	Adult Screening Room (GP)	EXRG4	7.43	80	Minimum up to four projected FTE providers. One additional room for increment of four providers or portion thereof
	Pediatric Screening Room (GP)	EXRG5	11.15	120	One per each eight providers, for pediatric services provided.
	Provider's Exam Rooms (GP)	EXRG1	11.15	120	Army - Two per projected FTE. (Also note resident examination rooms.)
		EXRG2	11.13	120	Navy.
		EXRG3			Air Force/VA.
	Treatment Room	TRGS1	14.86	160	One per urology service.
	Dressing Room/Cubicle (GP)	DR001	4.65	50	One cubicle per treatment room.
	Nephrology Renal Study	OPNR1	11.15	120	One per urology service.
	Urodynamics Exam Room(GP)	EXUD1	14.86	160	Minimum of one room. One room per every two projected FTE providers.
	Urodynamics Toilet (GP)	TLTU1	4.65	50	One per each Urodynamics room.

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PATIENT AREAS (continued)

Patient Toilet (GP)	TLTU1	4.65	50	One if number of projected FTE providers is between three and eight. Provide two toilets if number of projected FTE providers is between nine and fifteen. Provide three toilets if number of projected FTE providers is sixteen or more with a maximum of three toilets.
Satellite Lab (GP)	LBSP1	9.29	100	One drawing chair and small lab. If in clinic concept of operations.

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Cystoscopy with fluoroscopy:

PATIENT AREAS (Cystoscopy)

Cystoscopic Radiology	XDCY1	40.88	440	See formula at 3.14.6. Minus number of cystoscopy rooms with fluoroscopic and optional urodynamic capability in OR. Locate in one place only: either in OR Section 4.4 or in this section. Includes x-ray control booth.
Dressing Room/Cubicle (GP)	DR001	4.65	50	One cubicle per service.
Cystoscopy Toilet (GP)	TLTU1	4.65	50	One per cystoscopy room.
Sub-waiting	WRC01	7.43	80	Minimum. Add 40 nsf for each cystoscopy room greater than one.
Recovery Room (GP)	RROP1	11.15	120	Minimum (one bed). Add 120 nsf for each additional cystoscopy room greater than two.
Recovery Toilet (GP)	TLTU1	4.65	50	One per recovery room.
Control and Observation (GP)	NSTA3	5.57	60	One per recovery room.
Digital Radiology Reading Room	XVC01	11.15	120	One when cystoscopy service offered.
Sterile Supply Room	ORCW1	9.29	100	One per cystoscopy clinic.
Scrub Area (GP)	ORSA1	6.50	70	Provide one sink per two cystoscopy rooms.

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STAFF AND ADMINISTRATIVE AREAS

		OFD01			Army. One per projected FTE staff provider. (See also Residency Program section.)
•	Dravidar Office (CD)	OFD02	11.15	120	Navy - One per projected FTE staff provider.
	Provider Office (GP)		11.15	120	(See also Residency Program section.)
		OFD03			Air Force/VA - One per projected FTE staff provider. (See also Residency Program
		01-003			section.)
l					Private office, Standard Furniture. One per
	2.7	OFA01		4.00	projected FTE Nurse Manager.
i	Nurse Manager Office	OF LOG	11.15	120	Private office, Systems Furniture. One per
		OFA02			projected FTE Nurse Manager.
		WRCH1	11.15	120	Army/Navy/VA. Minimum. Add 40 nsf for
	Nurse Workroom	WKCIII	11.13	120	each projected FTE nurse above four.
	TVUISC WOLKTOOM	OFA03	5.72	60	Air Force. Cubicle Systems Furniture. One per
			3.12	00	projected FTE Nurse.
	NCOIC/LCPO/LPO/SMT Office	OFA01	11.15	120	One per <u>clinic.</u>
		OFA02			*
		OFA01			One per projected FTE requiring a private
	Administrative Personnel with	OTAOI	11 15	120-	office. See Section 2.1. Some examples are Group Practice Manager, Nurse Educator,
	Private Office	-0.0	11.15		Health Care Integrator, any staff who
		OFA02			interviews or counsels patients.
					Per projected FTE requiring a dedicated
	Administrative Cubicle	OFA03	5.57	60	workspace but not a private office. See Section
			3.57	00	2.1.
	Patient Records Area	FILE1	<u>5.57</u>	<u>60</u>	One per clinic,
	Copy room	RPR01	9.29	100	For Copier/Fax/Mailbox distribution.
	Forms/Literature Storage	SRS01	11.15	120	One per clinic.
	-	CRA01	23.23	250	Minimum use CRA01. One per department
	Conference Room (GP)	CRA02	27.87	300	with less than eight officers or officer
	Conference Room (GP)	CRA03	37.16	400	equivalents. For increase in size (CRA02 and
					CRA03) see Section 6.1.
	Staff Lounge (GP)	SL001	13.01	140	Minimum. See Section 6.1 for increase in size.
ı	B 18 (27)	I Door	1.06	20	For staff without a dedicated office/cubicle
	Personal Property Lockers (GP)	<u>LR001</u>	<u>1.86</u>	<u>20</u>	space. See Section 6.1 for increase in size or for
					Changing Locker Room criteria.
	Stoff Toilete (CD)	TITII	4.65	50	Minimum for total clinic staff of at least ten.
	Staff Toilets (GP)	TLTU1	4.03	30	See Section 6.1 for increase in size and for
l					male/female breakdown.

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Deleted: System Furniture Cubicle, Per assigned FTE, see Section 2.1. Provide 60 nsf for each full time personnel who require office space.

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Deleted: Provide one if there are more than 15 FTE assigned. Add one TLTU1 For each 15 FTE or see section 6.1 for male/female breakdown.

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FUNCTION	ROOM	AUTHO	ORIZED	DI ANNING DANGE/COMMENTES
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CLINIC SUPPORT AREAS

Clean Utility (GP)	UCCL1	11.15	120	For up to 6 projected FTE providers.	
		13.94	150	For 7 - 12 projected FTE providers.	
		16.72	180	For more than 12 projected FTE providers.	
	USCL1	8.36	90	For up to 6 projected FTE providers.	
Soiled Utility (GP)		11.15	120	If For 7 - 12 projected FTE providers.	
		13.94	150	For more than 12 projected FTE providers.	
Litter/Wheelchair Storage	SRLW1	5.57	60	One per clinic.	
Crash Cart Alcove	RCA01	1.86	<u>20</u>	One per clinic. Can be shared between several	
Clash Cart Alcove				clinics if fully accessible to all.	
Equipment Storage	SRE01	9.29	100	One per clinic.	
Urology Laboratory	LBUR1	7.43	80	One per clinic.	
Scope Wash Room (GP)	USCL2	9.29	100	One per clinic.	
Equipment Storage and Maintenance Room	SRSE1	13.94	150	One per clinic.	

Functions which are required for Residency Education in Urology:

The following areas must be programmed if the MTF has a Urology Residency Program. These areas are in addition to those listed under common areas above.

RESIDENCY PROGRAM.

		OFD01			Army. One per director of residency program.		
		OFD02			Navy. One per director of residency		
ļ	Residency Program Director (GP)	01 D02	11.15	120	program.	_	
		OFD03			Air Force/VA. One per director of residency	_ `	
		01 D03			nrogram.	_`` `	
	Secretary with Visitor Waiting.	SEC01	11.15	120	One per projected FTE secretary.		
	Private Office	OFA01	11.15	120	One per projected FTE that requires a private	,	
	Tirvate Office	OFA02	11.10	120	office		
	Administrative Cubicle	OFA03	5.57	60	Provide 60 nsf per projected FTE position.		
	Resident Cubicle	OFA03	5.57	60	Minimum. Per projected resident.	_	
	Residency Library	LIBB1	13.01	140	One per residency program.	_	

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	Deleted: One per Director of a Family Practice Residency Program, if there is an assigned FTE
, `Y	Deleted: 60 nsf per assigned resident.
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DoD Space Planning Criteria for Health Facilities <u>Urology</u>

FUNCTION	ROOM	AUTHORIZED	PLANNING RANGE/COMMENTS
FUNCTION	CODES	m ² nsf	PLAINING RANGE/COMMENTS

RESIDENCY PROGRAM (Contin	nued)				~=	Deleted: STAFF
Residency Conference Room (GP)	(GP) CRA01 23.23 250 Minimum, one per residency program. For increase in size see Section 2.1.			Deleted: AND ADMINISTRATIVE AREAS		
Resident Exam Room (GP)	EXRG1	11.15	<u>120</u>	Army. One per projected resident. Minus the two monitored exam rooms.		Deleted: cont Deleted: R
	EXRG2			Navy. (See above planning range comments.)		Deleted: P
	EXRG3			Air Force/VA. (See above planning range comments.)	Ì	Deleted: increased sizing
Monitored Exam Room - Subject & Observer Room (GP)	EXRG1	11.15	120	Army - Provide two exam rooms per residency program, and one CMP02. These rooms use cameras and videotapes.		
	EXRG2 EXRG3			Navy – see above planning range comment. Air Force/VA – see above planning range – comment.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Deleted: r
	CMP02	5.57	<u>60</u>	One room can support two exam rooms.		
Preceptor/Consult Room	OFDC1	11.15	120	One per ten staff physicians per clinic concept		

3.14.6.: **FORMULAS**:

Cystoscopic Room Requirements:

Cystoscopic Rooms = <u>(annual urology visits/52) x 0.5</u> 0.6 proc per hr per room x 30 hr per wk